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POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/806,703
	Filing Date	April 30, 2001
	First Named Inventor	Lucilla STEINAA
	Title	Methods for Therapeutic Vaccination
	Art Unit	1644
	Examiner Name	Marianne DiBRINO
	Attorney Docket Number	BNIT0004-PCT-US-A

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.
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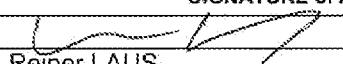
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I am the:

☐ Applicant/Inventor.
OR
☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature		Date	10/1/2010
Name	Reiner LAUS	Telephone	(650) 681-4651
Title and Company	President & CEO, BN ImmunoTherapeutics, Inc.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

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